PTO/SB/06 (07-06)

Approved for use through 1/31/2007, OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 |  |   |                                     |  |                     |    | Application or Docket Number<br>10/590,383 |                        |                       | ing Date<br>23/2006   | To be Mailed           |  |
|---|--|---|-------------------------------------|--|---------------------|----|--|------------------------|-----------------------|-----------------------|------------------------|--|
|   | Al   | PPLICATION                                | AS FILE                             | SMALL  | ENTITY []           | OR |  | HER THAN               |                       |                       |                        |  |
| Н   | FOR  |   | NUMBER FILED                        |  | NUMBER EXTRA        |    | RATE (\$)                                  | FEE (\$)               | <u> </u>              | RATE (\$)             | FEE (\$)               |  |
| ×   | BASIC FEE<br>(37 CFR 1.16(a), (b),   | or (c))                                   | N/A                                 |  | N/A                 |    | N/A  | .,,                    | 1                     | N/A                   | 300                    |  |
|   | SEARCH FEE<br>(37 CFR 1.16(k), (i),  | or (m))                                   | N/A                                 |  | N/A                 |    | N/A  |                        | 1                     | N/A                   |                        |  |
|   | EXAMINATION FE<br>(37 CFR 1.16(o), (p),  |   | N/A                                 |  | N/A                 |    | N/A  |                        |                       | N/A                   |                        |  |
|   | TAL CLAIMS<br>CFR 1.16(i))   |   | minus 20 =                          |  |                     |    | x \$ =                                     |                        | OR                    | x \$ =                |                        |  |
| IND   | EPENDENT CLAIM<br>CFR 1.16(h))   | S   | minus 3 =                           |  | •                   |    | x \$ =                                     |                        | 1                     | x \$ =                |                        |  |
|   | APPLICATION SIZE<br>(37 CFR 1.16(s))   | FEE shee<br>is \$2<br>addi                | ts of pap<br>50 (\$125<br>tional 50 | wings exceed 100<br>ation size fee due<br>ity) for each<br>ction thereof. See<br>37 CFR 1.16(s). |                     |    |  |                        |                       |                       |                        |  |
|   | MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))  |   |                                     |  |                     |    |  |                        | 1                     |                       |                        |  |
| * If  | * If the difference in column 1 is less than zero, enter "0" in column 2.  |   |                                     |  |                     |    | TOTAL                                      |                        | 1                     | TOTAL                 | 300                    |  |
|   |  |   |                                     |  |                     |    |  |                        | ER THAN<br>ALL ENTITY |                       |                        |  |
| AMENDMENT   | 10/10/2008   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                     | HIGHEST<br>NUMBER<br>PREVIOUSL<br>PAID FOR   | PRESENT<br>LY EXTRA |    | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |                       | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
|   | Total (37 CFR<br>1.18())   | · 16                                      | Minus                               | <b>~</b> 20  | = 0                 |    | x \$ =                                     |                        | OR                    | X \$52=               | 0                      |  |
|   | Independent<br>(37 CFR 1.16(h))  | • 1                                       | Minus                               | ···3   | = 0                 | 1  | x \$ =                                     |                        | OR                    | X \$220=              | 0                      |  |
|   | Application Size Fee (37 CFR 1.16(s))  |   |                                     |  |                     |    |  |                        | П                     |                       |                        |  |
| ٩   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   |                                     |  |                     |    |  |                        | OR                    |                       |                        |  |
|   |  |   |                                     |  |                     |    | TOTAL<br>ADD'L<br>FEE                      |                        | OR                    | TOTAL<br>ADD'L<br>FEE | 0                      |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                                     |  |                     |    |  |                        |                       |                       |                        |  |
|   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                     | HIGHEST<br>NUMBER<br>PREVIOUSI<br>PAID FOR   | PRESENT<br>LY EXTRA |    | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |                       | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
| Ξ   | Total (37 CFR<br>1,16(i))  |   | Minus                               |  | =                   | l  | x \$ =                                     |                        | OR                    | x \$ =                |                        |  |
| AMENDMENT   | Independent<br>(37 CFR 1,16(h))  | *   | Minus                               | ***  | =                   |    | x \$ =                                     |                        | OR                    | x s =                 |                        |  |
| ä   | Application Size Fee (37 CFR 1.16(s))  |   |                                     |  |                     |    |  |                        | 1                     |                       |                        |  |
| AM  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   |                                     |  |                     | l  |  |                        | OR                    |                       |                        |  |
| TOTAL<br>ADDL<br>FEE  |  |   |                                     |  |                     |    |  |                        | OR                    | TOTAL<br>ADD'L<br>FEE |                        |  |
| ** If   | "If the entry in column 1 is less than the entry in column 2, write "o'in column 3. Legal Instrument Examiner." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "3".  The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20".  "If the "Highest Number Previously Paid For" (To ITHIS SPACE is less than 20".  "If the "Highest Number Previously Pai |   |                                     |  |                     |    |  |                        |                       |                       |                        |  |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USE) process) an application. Confidentiality is ownered by \$8 USE. of 122 and 37 CFR 1.14. This collection is estimated to be 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFIO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer. US. Platent and Trademark Office, U.S. Department of Communos, D.O. Box 1450, Aboxandria, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS AUDIENCES SEND TO: Commissioner for Platents, P.O. Box 1450, Alexandria, VA 2213-1450.